

Abstract 551

TITLE: Assessing HIV Prevention Provider Knowledge of Behavior Science Theory: Building on Existing Intuitive Experience

AUTHORS: Gandelman, A¹; Vogan, S¹; Dolcini, M² (¹California STD/HIV Prevention Training Center; ²Center for AIDS Prevention Studies, UCSF)

ISSUE: The use of behavioral science theory is being recommended as a basis for prevention programs, yet STD/HIV prevention providers in clinic and community settings may have little or no formal training in this area.

SETTING: Training locations throughout the four STD/HIV Behavioral Intervention sites.

PROJECT: To identify STD/HIV prevention providers' baseline knowledge of behavior change theory and concepts, 336 staff from community-based organizations and local health departments participated in 1 of 21 trainings in behavior science theory between 1998-1999. Before theories were presented, participants were divided into small groups and asked to develop their own "models of behavior change" based on their intuitive beliefs and personal experiences.

RESULTS: A total of 584 variables were identified by participants as necessary for behavior change, with 94% emphasized in major behavior science theories. Variables fell into the following five categories: *risk appraisal* (13%) including severity and susceptibility; *self perceptions* (29%) such as self efficacy, attitudes, intentions, and cost-benefit analysis; *emotion and arousal* (9%) consisting of positive and negative emotional states; *relationships and social influence* (31%) including subjective and cultural norms, power dynamics, social support and peer pressure; and *structural and environmental factors* (8%) which included access to services, poverty, and laws or policies impacting quality of life issues pertaining to HIV prevention. Variables not directly associated with behavior change theories comprised 6% of the models.

LESSONS LEARNED: Many theoretical variables associated with formal behavioral science theories were mentioned consistently, indicating that STD/HIV prevention providers have basic, intuitive understanding of behavior change concepts. Once validated with this information, participants have been eager to learn more about the behavioral determinants that influence STD/HIV risk-taking behavior, and expressed their intentions to improve the quality of interventions they currently conduct. Trainers, funders, and researchers should recognize the basic knowledge of providers that can enhance further learning and help to reduce gaps between research and practice.

PRESENTER CONTACT INFORMATION

Name: Alice Gandelman

Address: CDHS, STD Program, CA PTC
1947 Center Street, # 201
Berkeley, CA 94704

Telephone: (510) 883-6600

Fax: (510) 849-5057

E-mail: agandelm@dhs.ca.gov